**Application or Docket Number** 106111705

Effe	ctive Janua	ry 1, 20	03			i	004	' /	0 7	
CLAIMS AS FILED - PART (Column 1)			(Colum	SMALL TYPE	SMALL ENTITY TYPE			OTHER SMALL		
TOTAL CLAIMS	1.35	.35				E	FEE		RATE	FEE
FOR :	NUMBER	FILED	NUMBE	ER EXTRA	BASIC	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS	-35 mi	nus 20=	. 15		X\$ 9	) e		OR	X\$18=	270
INDEPENDENT CLAIMS	1 4 m	/ minus 3 =		' /		X42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT						)=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						Ž		OR	TOTAL	1104
A / A / CLAIMS AS AMENDED - PART II						•			OTHER	
9/10/17 (Column 1		(Colu	mn 2)	(Column 3)	SMA	LLI	ENTITY	OR	SMALL	
CLAIMS REMAINING AFTER AMENOMEN		NUM PREVIO	BER DUSLY	PRESENT EXTRA	RAT	RATE TI		a D Yer	HATE!	ADDI- TIONAL FEE
AFTER AMENOMEN Total • 3 4 Independent • 1	Minus	-3	5	-/	X\$ 9	; =	· · · · · · · · · · · · · · · · · · ·	OR	X\$18=	· Pica maios
independent .	Minus	***	P	1	X42	=	- ) (*)	OR	X84=	TYAN
FIRST PRESENTATION OF	MULTIPLE DE	PENDEN	CLAIM	لىلات	+140	)= <sup>^</sup>	ter jeren	OR	∔280 <b>=</b>	FEE
11.1		•				TAL	3 3		TOTAL	
1/14/5 (Column 1	n .	(Colu	mn 2)	(Column 3)	ADDIT.	FEE		3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	ADDIT. FEE	750
CLAIMS REMAINING		HIGH NUM		PRESENT EXTRA	RAT	Έ	ADDI- TIONAL	23	RÂTE	ADDI- TIONAL
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Independent •	Minus		0	- 3			- WE STEED WITH	OR S	X84=	1 1000
FIRST PRESENTATION OF	MULTIPLE DE	PENDEN	T.CLAIM		X42	=	a area e e e	OR	# 1 CA - 4 A A A A A A A A A A A A A A A A A	
		$M_{i} \wedge \mathcal{T}$	en <b>p</b> e		+140	)= <u> </u>	तिः गिष्ठेष्टे । प्राथमस्य	ÖR	+280=	MILL
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PATENT A (Column		1000		(Column 3)					K. and - street a	LJEE.
CLAIMS' REMAININ AFTER AMENDMEI  Total Independent	G	NUN	HEST IBER OUSLY I'FOR	-PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE	د د د د د	PATE.	ADDI- TIONA FEE
Total •	Minus	el Pri	rancoccassas 14 (Prim) f	an Allipane	X\$.9	) <del>=</del>		OR	X\$18=	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Independent +	Minus	***			X42	<b></b> ,		OR	X84≟	***********
FIRST PRESENTATION OF	MULTIPLE DI	EPENDEN	T CLAIM		.444	\-		1		100
If the entry in column 1 is less th	an the entry in co	lumn 2, wri	o o in co	tumn 3.	+140	TAL	2	OR.		A CALL
"If the "Highest Number Previous	ty Paid For IN T	HIS SPACE HIS SPACE	is less that	in 20, enter "20. in 3, enter "3."	ADOIT.	FEE		OR	AUDIT FEE	TIONA
The Trighest Number Previous	Paid For (Total	or Independ	uti ei (trab	highest numbe	r found in th	io ap	propriete bo	ik en o	iding=	
FORM PTO-873 (Rev 12/02) " "U	S Government Printh	Office: 2003	- 496-27B/6	0151	Patent and	rade	mark Office, L	IS. DE	PARTMENT C	FCOMMER
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